

Montana State Legislature

2013 Session

Additional Documents include:

- * Business Report**
- * Roll Call- attendance**
- * Standing Committee Reports,**
- * Table Bills, Fiscal reports etc.**
- * Roll Call Votes**
- * Witness Statements**
- * Informational items**
- * Visitor Registrations**
- * Any other Documents;**
 - ~ Petitions if any?**
 - ~ Any and all material handed in after the meeting end.**

**The original is on file at the
Montana Historical Society and
may be viewed there.**

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BUSINESS REPORT

**MONTANA SENATE
63rd LEGISLATURE - REGULAR SESSION**

SENATE BUSINESS, LABOR, AND ECONOMIC AFFAIRS COMMITTEE

Date: Friday, February 8, 2013
Place: Capitol

Time: 9:00 AM
Room: 422

BILLS and RESOLUTIONS HEARD:

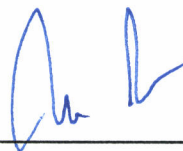
SB 190 - Revise certain canceled dealership contract repurchase requirements
- Sen. Jon Sonju

SB 244 - Specify state/tribal compact negotiations for class III gaming
- Sen. Jonathan Windy Boy

EXECUTIVE ACTION TAKEN:

None.

Comments:



SEN. Jon Sonju, Chair

MONTANA STATE SENATE
ROLL CALL
BUSINESS, LABOR, AND
ECONOMIC AFFAIRS

DATE: 2-8-, 2013

NAME	PRESENT	ABSENT/ EXCUSED
Vice Chair Jackson	✓	
Senator Facey	✓	
Senator Arntzen	✓	
Senator Moore		✓
Senator Stewart-Peregoy	✓	
Senator Barrett	✓	
Senator Brown	✓	
Senator Van Dyk	✓	
Senator Vuckovich	✓	
Chairman Sonju	✓	

10 Committee Members

SENATE BUSINESS, LABOR, AND ECONOMIC AFFAIRS COMMITTEE

Sponsor: **Sen. Jon Sonju**

PLEASE PRINT

[illegible]

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.

SENATE BUSINESS, LABOR, AND ECONOMIC AFFAIRS COMMITTEE

Sponsor: Sen. Jonathan Windy Boy

PLEASE PRINT

[illegible]

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.

February 3, 2013

Dear Committee,

I am writing to support M. Caferro's SB 10. I must admit that I changed my position on this bill after listening to testimonies on Feb. 1st. I was under the impression that the AA sponsors and such have done many of the services that the mental health peer support persons would do and I didn't see any reason why we should use more money for something that a friend could do. But, now I see that they want to be considered on par with a nursing assistant that also has to be licensed and credentialed. I know that there are many distasteful things that nursing assistants do that friends shy away from and being there for a severely needy, manic, or depressed person requires education and is more effective when on a routine, professional schedule instead of when it is convenient. Consequently, I now totally support the plan.

I am a registered nurse that maintains a number of in-home programs in Phillips County. We do not have a peer specialist, but I did have a nurse's aide in a manic person's home for a medical problem. During the time that she qualified for the medical services the doctor was amazed at the decreased number of emergency room visits she required and the sheriff offered to vouch for the effectiveness of the program as his officers were so relieved to have a break from the constant SOS calls and the lengthy, manic phone calls to the station. The nurse's aide deserved her wages as in this case it took assisting her with her bills, making sure that the medications were being taken as ordered, and making a blueberry pie. The same obsessive routine every week, but it was successful and she did not have to be hospitalized and remained functional and independent with the assistance. Consequently, we saved thousands of Medicaid dollars.

My son, a M.D., practicing in Denver reported that the psych patients are always accompanied by a peer specialist to their appointments. This practice has improved compliance with their medication regime. Plus, 50% of the mentally ill have a difficult time believing that they are really afflicted with the illness and having an objective person report the subtle trigger symptoms that indicate the need for changing a medication or treatment plan has been similar to treating an infected area when it has a little redness versus waiting until it is so infected that it needs an amputation. That state is also having success pairing the elderly with the mentally ill so that the strengths of each group can supplement the deficit areas of the other.

I also can see why this bill is in your arena as the problem of finding suitable employment for persons recovering from a mental illness is dire. Our state seems much more tolerant of a person who does something dangerous or irresponsible while drinking than when they have an emotional breakdown that never endangered anyone, but themselves. I have a son that is battling the job market after being hospitalized for treatment and it is brutal even for a guy with a college degree and a solid work history. This bill would enable more people to re-enter the work force and that is absolutely essential for our economy and for the person's recovery.

Thank you for your attention to this matter and your service. Sincerely, Janice Reichelt R.N., B.S.N.
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